

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

-001

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Row 1	Reporter Name	Submission date.	Contact person (if different than reporter)	Internal ID
Administrative Data	Simone Seifert-Higgins	May 1, 2017	Joy Thompson	32404139
	Address Monsanto Company Mail Stop C3NA 800 N Lindbergh Blvd. St. Louis, MO 63167		Address Missouri Regional Poison Center (MRPC) 7980 Clayton Road, Suite 200 St. Louis, MO 63117	
	Phone # (314) 694-1538		Phone # (314) 772-8300	
	Incident Status: New <u>X</u> Update If update, include date of original submission.	Location and date of incident. (City, County, State) State: Maryland Date: 3/17/2017	Date registrant became aware of incident. April 2017	Was incident part of larger study? Y <u>N</u> <u>X</u> U
Row 2	EPA Registration # (Product 1)		EPA Registration # (Product 2)	
Pesticide(s) Involved	524-445			
	A.I. (s) Glyphosate 41%		A.I. (s)	
	Product 1 Name Roundup Herbicide		Product 2 Name	
	Exposed to concentrate prior to dilution? Y N U <u>X</u> NA		Exposed to concentrate prior to dilution? Y N U NA	
	Formulation		Formulation	
Row 3	Evidence label directions were not followed? Yes <u>No</u> <u>X</u> U Intentional misuse <u>No</u>		Situation (act of using product): (examples include mixing/loading, reentry, application, transportation, repair/ maintenance of application equipment, manufacturing/ formulating). See MRPC incident report (next page)	
Incident Circumstances	Applicator certified PCO? Yes No U <u>X</u>			
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff) See MRPC incident report (next page)		Brief description of incident circumstances. See MRPC incident report (next page)	

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DOCUMENTATION